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Expires: May 31, 2005
Estimated average burden hours per response... 1

Potential persons who are to respond to the collection of information 1972 (6-contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



03028514

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	PR	OCESSED
	1 1	JL 3 1 2003
SEC USE (	THOMSON	
Prefix	Serial	FINANCIAL
DATE REC	EIVED	

Name of Offering ([] check if this change.)	is an amendme	ent and name I	nas changed, ar	nd indicate	in the second
Filing Under (Check box(es) that apply):	[ ] <u>Rule 504</u>	[ ] Rule 505	[√] <u>Rule 506</u>	[ ] Section 4(6)	 []ULOE
Type of Filing: [ √ ] New Filing	[ ] Amendmen	t			
A.	BASIC IDENT	IFICATION DA	ATA		
Enter the information requested  Name of Issuer (L. Lobeck if this in					

Name of Issuer ([ ] check if this is an amendment and name has changed, and indiciate change.) ISOTECHNIKA INC.

Address of Executive Offices (Number and Street, City, State, Zip Code)
Telephone Number (Including Area Code)

## 2100, 8215 - 112 STREET, EDMONTON, ALBERTA T6G 2C8

(780) 487-1600	
	Business Operations (Number and Street, City, State, Zip Code) Including Area Code) cutive Offices)
N/A	
Brief Description of B Biopharmaceutical	
Type of Business Org	ganization
[ √ ] corporation	[ ] limited partnership, already formed [ ] other (please specify):
[ ] business trust	[ ] limited partnership, to be formed
Control of the Control of Control	Month Year
Actual or Estimated [	Date of Incorporation or Organization: $[0]6][9]3$ [ $$ ] Actual [] Estimated
Jurisdiction of Incorp	bration or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction) [C][N]

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ √ ] Executive Officer	[√]Director[]General ar Managing Partner
Full Name (Last nam Foster, Dr. Robert	ne first, if individual)		entralinis estretario dell'indica y generali vivo di contra di mentra di vivoli di contra di vivoli di contra d
	ce Address (Number and Streed dmonton, AB T6J 1X9	et, City, State, Zip Co	ode)
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[√] Executive Officer	[√]Director[]General ar Managing Partner
Full Name (Last nam Koziak, Joseph	e first, if individual)		Andreadak at Copie (1994) in A. Papa pina anno an in an an at anno an at an an an Anthreadak (1994) paga paga a
	ce Address (Number and Streetst Avenue, Scottsdale, AZ 8		de)
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[√] Executive Officer	[√] Director [ ] General ar Managing Partner
Full Name (Last nam Yatscoff, Dr. Rand	· ·	1847), 1874-1874 (1884), 1884 (1884), 1884 (1884), 1884 (1884), 1884 (1884), 1884 (1884), 1884 (1884), 1884 (1	and any suitable 2019 1974 as a great an included an 2011 of 244 A fragment and 201
	ce Address (Number and Stree W, Edmonton, AB T6R 2Z5	et, City, State, Zip Co	de)

Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ √ ] Director [ ] General and/or Managing Partner
Full Name (Last nam <b>Walker, Doug</b>	e first, if individual)	PHE BANK BANK BANK BANK BANK BANK BANK BANK	area error para error de la calanda anta anta esta esta en esta en esta en esta en esta en esta esta esta esta
	ce Address (Number and Stree ive East, Edmonton, AB T6J		de)
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ √ ] Director [ ] General and/or Managing Partner
Full Name (Last nam Schurman, Donald I			
	ce Address (Number and Stree et, Edmonton, Alberta T6R 2		de)
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ √ ] Director [ ] General and/or Managing Partner
Full Name (Last nam <b>Meyer, Lawrence G</b> .		and a second control of the second control o	the first field and the state of the state o
	ce Address (Number and Stree Potomac, MD 20854	t, City, State, Zip Co	de)
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ √ ] Director [ ] General and/or Managing Partner
Full Name (Last nam Hoskins, William	e first, if individual)		
	ce Address (Number and Street Unit 20A/B, Boston, MA 0211		de)
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ √] Executive Officer	[ ] Director [ ] General and/or Managing Partner
Full Name (Last nam Bourgeault, Dennis	•		
	ce Address (Number and Street dmonton, AB T6R 1Z6	t, City, State, Zip Co	de)

Check Box(es) that Apply:	[ ] Pro	omoter [	] Benefic Owner			ecutive ficer	[]	Director	[ ] Genera Manag Partne	jing	r
Full Name (Last na Aspesiet, Dr. Laur		individu	ual)								
Business or Reside					City, Sta	te, Zip C	ode)				
	! ! : !										
(Use blank sl	neet, or c	opy and	d use add	litional	copies	of this s	heet, as	necessa	ary.)		
		B. INFC	RMATIO	N ABO	UT OFFE	RING					
1. Has the issuer so offering?	old, or doe	s the is	suer inten	d to sel	l, to non-	accredit	ed invest	tors in th	is		No [√
0.340. 13. 0			also in Ap							007.00	
2. What is the minir	1			•		-			•••••	<b>\$87,00</b> Yes	υ No
3. Does the offering				_						4	[ ]
4. Enter the information or indirectly, any co- with sales of security a broker or dealer re- or dealer. If more the dealer, you may set	mmission ies in the egistered an five (5	or simil offering with the ) persor	ar remune I. If a perse SEC and Is to be lis	eration fon to be lor with sted are	or solicit e listed is a state d associa	ation of particular and associated associate	purchase ociated p , list the i	ers in cor erson or name of	nection agent of the broker		
Full Name (Last name Sanc of America S			ual)								
Business or Reside 40 <sup>th</sup> Floor, 9 West	nce Addre 57 <sup>th</sup> Stree	ess (Nur et, New	mber and <b>York, NY</b>	Street, 10019	City, Sta	te, Zip C	ode)				
Name of Associated	Broker o	r Deale	r	***************************************	·····			<del></del>	***************************************		
Friedman, Billings 1001 19th Street No Potomac Towers Arlington, VA 22209	orth	⁄ & Co.,	Inc.								
States in Which Per	son Liste	d Has S	olicited or	Intend	s to Solic	it Purch	asers		<del></del>		
(Check "All States								[	] All St	ates	
[AL] [AK] [AZ] [IL]√ [IN] [IA] [MT] [NE] [NV] [RI] [SC] [SD]	[KS] [NH]	[CA] [KY] [NJ] [TX]	[LA] [NM]	[CT] [ME] [NY]√ [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[MS] [OR]	[ID] [MO] [PA] √ [PR]	

Full N	ame (La	ast name	e first, if	individua	al)							
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street,	City, Stat	te, Zip Co	ode)	***************************************		<del>-</del>
Name	of Asso	ciated E	Broker o	Dealer								•
States	in Whic	ch Perso	on Listed	Has So	olicited o	r Intends	to Solic	it Purcha	sers			•••
(Chec	k "All	States"	or chec	k indiv	idual St	ates)		••		[	] All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	ist name	e first, if	ndividua	al)							•
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street, (	City, Stat	e, Zip Co	ode)			
Name	of Asso	ciated E	Broker o	Dealer								_
							to Solic		sers			-
(Chec	k "All	States"	or chec	k indiv	idual St	ates)		••		[	] All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[Wi]	[WY]	[PR]
(	Use bla	nk she	et, or co	py and	use add	ditional	copies c	of this sh	eet, as	necessa	ry.)	•
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<u> </u>	OFFERI	NG PKI	CE, NU	VIDER	AL HARE		EAPEN	SES ANI	O USE O	- PROC	EEDS	
1. Ente	er the a	ggregate	e offering	price o	f securit	ies inclu	ded in th	is offerin	g			
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and al	ready ex	xchange	ed.									
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C	Convertit	- ,	=						\$ <u>see</u>	* below	\$ <u>see</u>	* below
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C	other (Sp								\$		_ \$	
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	Answe	er also i	n Appen	dix, Col	umn 3, if	filing ur	der ULC	E.				

offering price for each Common Share and Warrant (not sold separately).
 Warrants were issued on the basis of 1 Warrant for each 5 Common Shares purchased.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
Accredited Investors	Number Investors 13	Aggregate Dollar Amount of Purchases \$15,000,000
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
		Dollar Amount
Type of offering	Type of Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
	· · · · · · · · · · · · · · · · · · ·	· *
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees  Accounting Fees  Engineering Fees  Sales Commissions (specify finders' fees separately)  Other Expenses (identify) - Agent's Expenses  Total		£ 00.000.00
b. Enter the difference between the aggregate offering price given in resp- Question 1 and total expenses furnished in response to Part C - Question difference is the "adjusted gross proceeds to the issuer."		\$13,829,000.00
5. Indicate below the amount of the adjusted gross proceeds to the issuer		

used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

				Payments to Officers,	)
					Payments To Others
Salaries and fee	es	•••••••••••		[] \$	[]\$
Purchase of rea	l estate			[]	- []\$
		l installation of ma		[] \$	- _[]\$
Construction or	leasing of plant	buildings and fac	cilities	[] \$	[]\$
securities involvex change for the	ed in this offer e assets or sec	i (including the va ing that may be u curities of another	sed in issuer	[] \$	[]\$
Repayment of ir	debtedness			[] \$	[]\$
Working capital				[] \$	[] _\$13,829,000.00
Other (specify):_				[] \$	[]\$
	1			[]	[]\$
Column Totals		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		[] \$	- []\$
Total Payments	Listed (column	totals added)		· — — — — — — — — — — — — — — — — — — —	,829,000.00
***************************************		). FEDERAL SIG	NATURE		
The issuer has duly of this notice is filed und to furnish to the U.S. information furnished Rule 502.	ler <u>Rule 505,</u> th Securities and	e following signa Exchange Comm	ture constitutes an ission, upon writter	undertaking by the n request of its staff ant to paragraph (b)	issuer , the
Issuer (Print or Type)		Signature	0/	Date	
ISOTECHNIKA INC.		W Duo	caulo	JULY 28, 200	)3
Name of Signer (Prin	t or Type)	Title of Signer	rint or Type)		
DENNIS BOURGEA	ULT	CHIEF FINANCIA	AL OFFICER		

	ATTENTION	
Intentional misstater	nents or omissions of fact constitute federal criminal violations. (So	ee 18
	U.S.C. 1001.)	